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In the Paperwork Reduction Act of 1995, fig persons are required to respond to a collection of Information unless it displays a yallo OMB control number. PATENT APPLICATION FEE DETERMINATION RESIDENCE. philation of Docket Humber Substitute for Form PTO-876 APPLICATION AS FILED - PART I (Column 1) OTHER THAN SMALL ENTITY (Column 2) .OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BABIQ FEE RATE (\$) FEE (\$) RATE (\$) (\$7 CFR 1.16(a), (b), or (c)) N/A FEE (\$) NA · N/A SEARCH FEE N/A (87 CFR 7.16(N), (0, or (my) N/A N/A EXAMINATION FEE (87 OFR 1.16(0), (p), or (q)) N/A N/A N/A N/A N/A EMIALO JATOT N/A (37 CFR 1.16(1)) minus 20 = 26: INDEPENDENT OLAIMS OR 50 (37 CFR 1.16(h)) minus 9. = x 105 If the specification and drawings exceed 100 210 sheets of paper, the application size fee due is \$250 (\$130 for small entity) for each APPLICATION SIZE PEE (37 CFR 1.16(s)) additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) 185 370 \* If the difference in column 1 is less than zero, enter \*0\* in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) OTHER THAN (Column 3) OR SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) . AFTER AMENDMENT ADDI-PREVIOUSLY PAID FOR EXTRA RATE (\$) ADDI-TIONAL FEE (\$) Total FEE (\$) Minus **WEND** x 25 Independent Of OFR 1.16(h)) ÖR 50 Minus x 105 = Application Size Fee (37 CFR 1.16(s)) 210 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II) 185 3,70 OR: TOTAL ADD'L FEE TOTAL ADD'L FEE OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATÉ (\$) ADDI-TIONAL FEE (\$) AFTER PREVIOUSLY RATE (\$) ADDI-AMENDMENT PAID FOR TIONAL FEE (\$) Total (37 OFR 1.160)) Minus x 25 Independent DI OFA 1.16(N) x 50 Minus × 105 = Application Size Fee (37 CFR 1.16(s)) x 210 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (81 OFR 1.16(1)) 185 370 OŔ TOTAL ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This collection of Information is required by 37 OFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submittling the completed application to the USPTO. The will vary dependent to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

Address: SEND TO: Commits Interest of the Chief of Patents, P.O. Box 1450, Alexandria, VA 22313-1450. TOTAL "ADD'L FEE

ll you need assistance in completing the form, ball 1-800-PTO-8168 and select option 2.